
generator_name	COASTCAST CORPORATION
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lc_name:	COASTCAST CORPORATION
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lc_calc_volume:	22.7265 tons
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manifest_number	manifest_quantity_ton
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84426275	6.8805 tons
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84676920	0.10425 tons
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87119321	8.34 tons
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88293519	3.9615 tons
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88293684	2.7522 tons
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88293694	0.68805 tons
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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD 981 633 522		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address COAST CAST CORP. 2146 GLADWICK, COMPTON, CA 90220						A. State Manifest Document Number 87119321			
4. Generator's Phone (213) 638-0595						B. State Generator's ID			
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES						C. State Transporter's ID 904873			
6. US EPA ID Number CAD 042 245 001						D. Transporter's Phone 213/698-0991			
7. Transporter 2 Company Name						E. State Transporter's ID			
8. US EPA ID Number						F. Transporter's Phone			
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD. WHITTIER, CA 90602						G. State Facility's ID CIAID042245001			
10. US EPA ID Number CAD 042 245 001						H. Facility's Phone 213/698-0991			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
a. WASTE ALCOHOL N.O.S. UN 1987 FLAMMABLE LIQUID				9 4 0 DM		22000		G	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
						a. 01			
						b.			
						c.			
						d.			
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name HOWARD L. RAY				Signature <i>Howard L. Ray</i>				Month Day Year 11/10/98	
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name JAVIER HERNANDEZ				Signature <i>Javier Hernandez</i>	
								Month Day Year 11/10/98	
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name				Signature	
								Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name FRANK FORD				Signature <i>Frank Ford</i>				Month Day Year 11/10/98	

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

88293519

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address COASTCAST CORP 14831 MAPLE AVE., GARDENA, CA 90247		4. Generator's Phone (213) 532-2060		A. State Manifest Document Number 8 8293519		
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES		6. US EPA ID Number 10AD042245001		B. State Generator's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transporter's ID 904878		
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITEIR BLVD WHITTIER, CA 90602		10. US EPA ID Number 10AD042245001		D. Transporter's Phone (213) 698-0991		
				E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID C1AD101422459011		
				H. Facility's Phone (213) 698-0991		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. FLAMMABLE WASTE LIQUID N.O.S FLAMMABLE LIQUID (PETROLIUM HYDROCARBON SOLVENT) UN 1993		02	DDM	19.510	G	State EPA/Other
b.						State EPA/Other
c.						State EPA/Other
d.						State EPA/Other
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
		a. 01 b.				
		c. d.				
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Howard L. Ray		Signature Howard L. Ray		Month Day Year 10/21/1989		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Javier Hernandez		Month Day Year 10/20/89		
Printed/Typed Name JAVIER HERNANDEZ		Signature		Month Day Year		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name FRANK FORD		Signature Frank Ford		Month Day Year 10/21/1989		